

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	meron		07-31-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H.S	943	9-11-1
RESPONSE FORMALITY REVIEW	N2 fr	558 852	4-2-02 02-21-02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	9/15/02
2	1/21/03
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
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49	✓
50	✓

Claim	Date
Final Original	
51	9/15/02
52	1/21/03
53	✓
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

02943

11000 U.S. PRO
09/01/02

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 Form 10
 (Rev. 08)